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					Lisa Swiszcz Hazzard			(Depositor's name)
			/Lisa Swiszcz Hazzard/			(Signature)		
					08/11/2010			(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENT			DOCKET NO.	CONFIRMATION NO.
10/543,083	01/04/2006		Mark H	lumayun	58478(48240)		(48240)	2575
TITLE OF INVENTIO	TINAL CANNULA FOR SUBRETINA		TIDDETINIAL	DRIIC DELIVERY				
TITLE OF INVENTIO	N. KESEKVOIKS	WIIIISOBKE	IIIAL CANIN	OLATOR	ODKLINAL	DRUG DELIV	EK1	
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE PUBLICAT		TION FEE	TOTAL FEE(S) DUE		DATE DUE
Non-Provisional	yes	\$755	.00	\$300.00		\$1,055.00		08/13/2010
EXAMINER		ART UNIT		CLASS-SUBCLASS				
M. A. Mendez		3763		604	-500			
Change of correspon     Address" (37 CFR 1.36)	dence address or indication	on of "Fee			ent front page, 1 to 3 registers		Educade As	ngell Palmer & Dodge LLP
Change of correspondence address (or Change of			attomeys or agents OR, alternatively,					
Correspondence Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of					rless
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached.			tim to 2 againstand natural attenuation of against 16 ag					
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	AND RESIDENCE DAT		TED ON THE	PATENT	(print or type)			
PLEASE NOTE: Unl	less an assignee is identifi	ed below, no as	ssignee data wi	ll appear on	the patent. If a	n assignee is id	entified below,	the document has been filed
	forth in 37 CFR 3.11. Co	mpletion of this						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Doheny Retina Insti	Los Angeles, California							
Please check the appropriate assignce category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government								
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X Issue Fee A check in the amount of the fee(s) is enclosed.								
X         Publication Fee (No small entity discount permitted)         Payment by credit card. Form PTO-2038 is attached.								
Advance Order	-# of Copies		X The Dir	ector is here	by authorized	by charge the r	equired fee(s).	or credit any overpayment, to
			Deposit	Account N	umber	04-1105		
5. Change in Entity St	atus (from status indicate	d above)						
	ims SMALL ENTITY sta		R 1.27.	b. Applica	nt is no longer	claiming SMA	LL ENTITY st	atus. See 37 CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and interest as shown by the re-	Publication Fee (if require	d) will not be as	cepted from an	any) or to re yone other ti	e-apply any prev nan the applican	viously paid issu- nt; a registered a	fee to the appl tomey or agent	ication identified above. ; or the assignee or other party in
Authorized Signature /Lisa Swisz			cz Hazzard/			Date	At	ıgust 11, 2010
Typed or printed na	Typed or printed name Lisa Swiss					Registra	tion No.	44,368